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Name: Mail Stop RCE
Group Art Unit 3738 / Examiner David H. Willse

Firm: U.S. Patent & Trademark Office

Fax No.: 571-273-8300

Subject: U.S. Patent Application No. 10/825,522
Gary K. Michelson

Filed: April 15, 2004
METHOD FOR INSERTING NESTED
INTERBODY SPINAL FUSION IMPLANTS
Attorney Docket No. 101.0069-02000
Customer No. 22882
Confirmation No.: 8146

FROM:

Name: Amedeo F. Ferraro, Esq.

Phone No.: 310-286-9800

No. of Pages (including this): 13

Date: November 12, 2009

Confirmation Copy to Follow: NO

Message:**CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

I hereby certify that the attached Transmittal Form (in duplicate; total amount of \$810.00 to cover the RCE fee is to be charged to Deposit Account No. 50-3726), Request for Continued Examination (RCE), and Amendment are being facsimile transmitted to the U.S. Patent and Trademark Office on November 12, 2009.


Sandra L. Blackmon

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NOV 12 2009

FORM PTO-1083

Attorney Docket No. 101.0069-02000
Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary K. Michelson

Serial No: 10/625,522

Filed: April 15, 2004

For: METHOD FOR INSERTING NESTED
INTERBODY SPINAL FUSION IMPLANTS

Confirmation No.: 8146

Art Unit: 3738

Examiner: David H. Wilse

Mail Stop RCE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a Request for Continued Examination (RCE) and Amendment in reply to the Final Office Action dated September 1, 2009 in the above-identified application.

- No additional fee is required.
- Applicant hereby requests a ***-month extension of time to respond to the above office action.
- An Information Disclosure Statement Under 37 C.F.R. § 1.97(b) with Form PTO/SB/08 is enclosed.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	18	-	20	**	0	LG=\$52 SM=\$26	\$52
INDEPENDENT CLAIMS FEE	3	-	5	***	0	LG=\$220 SM=\$110	\$220
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS						LARGE ENTITY FEE = \$390 SMALL ENTITY FEE = \$195	\$ 0
						TOTAL	\$ 0

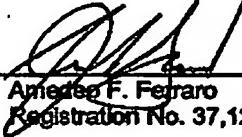
- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- The total amount of \$810.00 to cover the RCE fee is to be charged to Deposit Account No. 50-3726.
- The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-3726. A copy of this sheet is enclosed.

- Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
 MARTIN & FERRARO, LLP

Date: November 12, 2009

By: 
 Andrew F. Ferraro
 Registration No. 37,129

1557 Lake O'Pines Street, NE
 Hartville, Ohio 44632
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FORM PTO-1083

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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS				LARGE ENTITY FEE = \$390 SMALL ENTITY FEE = \$195		\$ 0		
						TOTAL		\$ 0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
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